



Marc Elrich  
County Executive

Date Sent: \_\_\_\_\_



Al R. Roshdich  
Director

## RESIDENTIAL PERMIT PARKING PETITION

**Street Name:** Residents Street

**Side(s):** Both

(both, north, south, east, west)

**Block Between:** Name of Road

**And:** Name of Road

**INSTALL:**

Permit Parking Only

9AM – 5PM

Monday-Friday

<u>IN FAVOR</u>	<u>OPPOSED</u>	<u>ADDRESS -- NUMBER &amp; STREET</u>	<u>PRINT NAME</u>	<u>SIGNATURE</u>

Each petition **must** include a **specific permit parking restriction** and should be reviewed and approved by MCDOT **prior** to circulating the petition. All occupied households **must indicate** with a check mark either “**in favor**” or “**opposed**” to the parking restriction. All addresses including corner properties facing an intersecting street must be listed; vacant properties should be noted. In cases where a signature cannot be obtained, (e.g. home is vacant, resident rarely home), please note this on the petition. Only one signature per household will be counted. A two-thirds majority **Ain favor@** is required to install/modify the parking restriction.

Division of Traffic Engineering and Operations